JAN 3 1 2005		er with applicable f	or <u>F</u>	Commissioner f P.O. Box 1450 Alexandria, Vir ax (703) 746-4000	or Patents ginia 22313-1450	·
appropriate AWI Carther indicated unless correct maintenance fee notific	s form should be used for correspondence including ted below or directed other ations.	for transmitting the ISSU of the Patent, advance of the Patent, advance of the transfer in Block 1, by (a	UE FEE and P rders and notifi a) specifying a	PUBLICATION FEE (if required ication of maintenance fees new correspondence addres	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sep	should be completed of t correspondence address arate "FEE ADDRESS
CURRENT CORRESPON	DENCE ADDRESS (Note: Use BI			Note: A certificate of Fee(s) Transmittal. T papers. Each addition have its own certification.	f mailing can only be used f his certificate cannot be used nal paper, such as an assignm te of mailing or transmission.	for domestic mailings for any other accompa ent or formal drawing,
KODA & AN Suite 1430 – 1 2029 Century F Los Angeles, C	.140 ark East A 90067- 3024 –2	983		I hereby certify that States Postal Service addressed to the Mi transmitted to the US	ertificate of Mailing or Tran this Fee(s) Transmittal is bein with sufficient postage for fi ail Stop ISSUE FEE address PTO (703) 746-4000, on the	smission ng deposited with the U rst class mail in an env s above, or being fac- date indicated below.
/2005 SSITHIB2 0000	0011 10044498			William L.	Androlia Reg. No.	
:2501 :1504 :8001	700.00 OP 300.00 OP 30.00 OP	1		January	27, 2005	(Sig
APPLICATION NO.	FILING DATE 01/10/2002		FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION N
APPLN. TYPE nonprovisional	SMALL ENTITY YES		<u> </u>	PUBLICATION FEE \$300	TOTAL FEE(S) DUE	DATE DUE 01/27/2005
<u> </u>		-\$685 \$70	50	\$300	\$\$\$\$5 <u>0</u> 00	01/27/2005
E		ART UNIT C				
L Change of correspon	2623	T	382-151000	·		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). All Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				ing on the patent front page, nes of up to 3 registered pat R, alternatively,	. 1201/1	& ANDROLI
Change of corres Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03	dication (or "Fee Address 02 or more recent) attach	" Indication form aed. Use of a Customer	(2) the nam registered a 2 registered	ne of a single firm (having as attorney or agent) and the na it patent attorneys or agents. I ame will be printed.	a member a 2 mes of up to	
Change of corres Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME	dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA these an assignee is ident the in 37 CFR 3.11. Comp	"Indication form ned. Use of a Customer A TO BE PRINTED ON ified below, no assignee pletion of this form is NO	(2) the nam registered a 2 registered listed, no na THE PATENT data will appe. T a substitute for	ne of a single firm (having as attorney or agent) and the na i patent attorneys or agents. I ame will be printed. (print or type)	a member a mes of up to f no name is 3	document has been file
Change of corres Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME PLEASE NOTE: Unrecordation as set for (A) NAME OF ASS	dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA these an assignee is ident the in 37 CFR 3.11. Comp	"Indication form ned. Use of a Customer A TO BE PRINTED ON 'ified below, no assignee pletion of this form is NO	(2) the nam registered a 2 registered listed, no na THE PATENT data will appe. T a substitute for	te of a single firm (having as attorney or agent) and the na i patent attorneys or agents. I ame will be printed. (print or type) ar on the patent. If an assign or filing an assignment. E: (CITY and STATE OR CO	a member a mes of up to f no name is 3	document has been file
Change of corres Address form PTO/S Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME PLEASE NOTE: Un recordation as set for (A) NAME OF ASS KABUSHIKI Please check the approp	dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA aless an assignee is ident th in 37 CFR 3.11. CompleTion Co	"Indication form and. Use of a Customer A TO BE PRINTED ON ified below, no assignee pletion of this form is NO (H NKAWA	(2) the nam registered a 2 registered of listed, no na THE PATENT data will apped a substitute for B) RESIDENCE TOKYO, rinted on the pa	te of a single firm (having as attorney or agent) and the nail a patent attorneys or agents. I ame will be printed. (print or type) ar on the patent. If an assignor filing an assignment. E: (CITY and STATE OR COUNTY AND	a member a mes of up to f no name is 3	
Change of corres Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME A PLEASE NOTE: Unrecordation as set for (A) NAME OF ASS KABUSHIKI	dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA aless an assignee is ident th in 37 CFR 3.11. CompleTion Co	"Indication form and. Use of a Customer A TO BE PRINTED ON ified below, no assignee pletion of this form is NO (H NKAWA	(2) the nam registered a 2 registered listed, no na THE PATENT data will apped a substitute for TOKYO, rinted on the pa b. Payment of F	te of a single firm (having as attorney or agent) and the na dipatent attorneys or agents. I ame will be printed. (print or type) ar on the patent. If an assignor filing an assignment. E: (CITY and STATE OR COUNTY APAN Attent): Individual I are See(s):	a member a 2	
Change of corres Address form PTO/S Address form PTO/S PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set for (A) NAME OF ASS KABUSHIKI Please check the approp 4a. The following fee(s) Issue Fee Publication Fee (dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA aless an assignee is ident the in 37 CFR 3.11. Complete	"Indication form and. Use of a Customer A TO BE PRINTED ON ified below, no assignee pletion of this form is NO (H INKAWA categories (will not be pr	(2) the nam registered a 2 registered a 2 registered listed, no na THE PATENT data will apped T a substitute for B) RESIDENCE TOKYO, rinted on the pa b. Payment of F A check in Payment b	te of a single firm (having as attorney or agent) and the na dipatent attorneys or agents. I arme will be printed. (print or type) ar on the patent. If an assignor filing an assignment. E: (CITY and STATE OR COUNTY AND I are the armount of the fee(s) is converged to the fee(s) is converged to the samount of the fee(s) is converged to the samount of the fee(s) is converged to the form PTO-200	a member a 2	roup entity 🚨 Govern
Change of corres Address form PTO/S Address form PTO/S PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set for (A) NAME OF ASS KABUSHIKI Please check the approp	dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA aless an assignee is ident the in 37 CFR 3.11. Complete	"Indication form and. Use of a Customer A TO BE PRINTED ON ified below, no assignee pletion of this form is NO (H INKAWA categories (will not be pr	(2) the nam registered a 2 registered a 2 registered listed, no na THE PATENT data will apped T a substitute for B) RESIDENCE TOKYO, rinted on the pa b. Payment of F A check in Payment b	te of a single firm (having as attorney or agent) and the na dipatent attorneys or agents. I arme will be printed. (print or type) ar on the patent. If an assignor filing an assignment. E: (CITY and STATE OR COUNTY AND I are the armount of the fee(s) is converged to the fee(s) is converged to the samount of the fee(s) is converged to the samount of the fee(s) is converged to the form PTO-200	a member a 2	roup entity 🚨 Govern
Change of corres Address form PTO/S Address form PTO/S PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME PLEASE NOTE: Unrecordation as set for (A) NAME OF ASS KABUSHIKI Please check the approp 4a. The following fee(s) Issue Fee Publication Fee (Advance Order - 5. Change in Entity St a. Applicant clair	dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA of the same assignee is ident the in 37 CFR 3.11. Complete Comple	"Indication form and Use of a Customer A TO BE PRINTED ON " ified below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA)	(2) the nam registered a 2 registered a 2 registered a listed, no no not be a constant of the part of the payment of the payme	the of a single firm (having as attorney or agent) and the nail patent attorneys or agents. It is a me will be printed. (print or type) ar on the patent. If an assignment. E: (CITY and STATE OR COUNTY AND IT IS INDIVIDUAL IN IT IN IT IN INDIVIDUAL IN IT IN IN IT IN IN IT IN IN IT IN IN IN IN IT IN IN IN IT IN	a member a 2	recedit any overpayme copy of this form).
Change of corres Address form PTO/S Address form PTO/S PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME PLEASE NOTE: Unrecordation as set for (A) NAME OF ASS KABUSHIKI Please check the approp 4a. The following fee(s) Issue Fee Publication Fee (Advance Order - 5. Change in Entity St a. Applicant clair	dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA of the same assignee is ident the in 37 CFR 3.11. Complete Comple	"Indication form and Use of a Customer A TO BE PRINTED ON " ified below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA)	(2) the nam registered a 2 registered a 2 registered a listed, no no not be a constant of the part of the payment of the payme	the of a single firm (having as attorney or agent) and the nail patent attorneys or agents. It is a me will be printed. (print or type) ar on the patent. If an assignment. E: (CITY and STATE OR COUNTY AND IT IS INDIVIDUAL IN IT IN IT IN INDIVIDUAL IN IT IN IN IT IN IN IT IN IN IT IN IN IN IN IT IN IN IN IT IN	a member a 2	recedit any overpayme copy of this form).
Change of corres Address form PTO/S Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME PLEASE NOTE: Un recordation as set for (A) NAME OF ASS KABUSHIKI Please check the approp 4a. The following fee(s) Issue Fee Publication Fee (Advance Order - 5. Change in Entity St a. Applicant clair	dication (or "Fee Address 02 or more recent) attack. AND RESIDENCE DATA of the same assignee is ident the in 37 CFR 3.11. Complete Comple	"Indication form and Use of a Customer A TO BE PRINTED ON " ified below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA) categories (will not be put) defined below, no assignee pletion of this form is NO (INKAWA)	(2) the nam registered a 2 registered a 2 registered a listed, no no not be a constant of the part of the payment of the payme	the of a single firm (having as attorney or agent) and the nail a patent attorneys or agents. It ame will be printed. (print or type) ar on the patent. If an assignment. E: (CITY and STATE OR COLUMN JAPAN Stent): Individual Stee(s): The amount of the fee(s) is converted to the sum of the patent of the fee(s) is converted to the sum of the patent of the fee(s) is converted to the sum of the fee(s) is converted to the sum of the fee(s) is converted to the feet of the patent of the fee(s) is converted to the feet of the feet o	a member a 2	recedit any overpayme copy of this form).

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.